

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Council of Insurance Agents & Brokers Political Action Committee

ADDRESS (number and street) ▼

701 Pennsylvania Avenue, NW

Suite 750

☐ Check if different than previously reported. (ACC)

Washington

DC

20004-2608

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00039578

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☒ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 01 2011

through

M M M / D D D / Y Y Y Y Y Y
11 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ken A. Crerar

Signature of Treasurer

Ken A. Crerar

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 20 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		345348.11
(b) Cash on Hand at Beginning of Reporting Period.....	430729.54	
(c) Total Receipts (from Line 19)	13778.28	528008.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	444507.82	873357.06
7. Total Disbursements (from Line 31)	17319.83	446169.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	427187.99	427187.99
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
11 / 01 / 2011

To:

M M / D D / Y Y Y Y Y
11 / 30 / 2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

10495.68

439621.56

(ii) Unitemized

3282.60

79887.39

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

13778.28

519508.95

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

8500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

13778.28

528008.95

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

13778.28

528008.95

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ►

13778.28

528008.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	3909.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	3909.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	417900.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	1319.83	24359.77
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17319.83	446169.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17319.83	446169.07

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13778.28	528008.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13778.28	528008.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	3909.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	3909.30

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Amendment being done to update beginning balance from adustment done with October 20 monthly.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Mike Heffernan

Mailing Address P.O. Box 653

City

San Ramon

State

CA

Zip Code

94583

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heffernan Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33978666

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mr. Patrick J McDaniel

Mailing Address 50243 Livingston Drive

City

Northville

State

MI

Zip Code

48168-6804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hylant Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33978675

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mr. Mitchell C Andrews

Mailing Address 28 Hidden Brook Dr

City

North Barrington

State

IL

Zip Code

60010-6914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plexus Groupe LLC (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.40

Date of Receipt

11 / 03 / 2011

Transaction ID : 33979847

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2883.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Walter R Fawcett III

Mailing Address 310 Macalpin Ct

City
Barrinton

State
IL

Zip Code
60010-6426

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Plexus Groupe LLC (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.40

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992747

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Mr. William H Lacey

Mailing Address 5321 Pebblebrook Dr

City
Dallas

State
TX

Zip Code
75229-5506

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Plexus Groupe LLC

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1833.40

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992748

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Mrs. Christina L Robbins

Mailing Address 1016 Arbor Court

City
Mount Prospect

State
IL

Zip Code
60056-4477

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Plexus Groupe LLC (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992749

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

186.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Jeffrey E Brogan

Mailing Address 5823 Sand Shell Court

City State Zip Code
Dallas TX 75252-2346

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Plexus Groupe LLC

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992750

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. Kerry R Martin

Mailing Address 1792 Clendenin Lane

City State Zip Code
Riverwoods IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Plexus Groupe LLC (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.74

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992751

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Mr. Glenn D Morrison

Mailing Address 1015 Gaslight Drive

City State Zip Code
Algonquin IL 60102-3213

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Plexus Groupe LLC (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992753

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Geoff Isaac

Mailing Address 2715 Crabtree Lane

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plexus Groupe LLC (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992756

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael R Mann

Mailing Address 364 Prospect Avenue

City State Zip Code
 Glen Ellyn IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plexus Groupe LLC (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

11 / 03 / 2011

Transaction ID : 33992757

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. Dell G Van Gilder Jr.

Mailing Address 1991 E Alameda Ave. Unit 11

City State Zip Code
 Denver CO 80209-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Van Gilder Insurance Corporation (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 14 / 2011

Transaction ID : 33997593

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1076.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Michael C Van Gilder

Mailing Address 2500 Cherry Creek Drive S.
Unit 404

City State Zip Code
Denver CO 80209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Van Gilder Insurance Corporation (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2011

Transaction ID : 33997594

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Keith A Kiser

Mailing Address 1505 Brockton Lane

City State Zip Code
Winston Salem NC 27106

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T - Blue Ridge Burke Insurance

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 11 / 2011

Transaction ID : 34004172

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. William McKnight

Mailing Address 8044 Owen St.

City State Zip Code
Baton Rouge LA 70809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wright & Percy BancorpSouth

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2011

Transaction ID : 34022214

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Eric L Krieg

Mailing Address 31724 Leeward Ct

City

Avon Lake

State

OH

Zip Code

44012-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.30

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023789

Amount of Each Receipt this Period

83.32

Full Name (Last, First, Middle Initial)

B. Mr. Bryan M Williams

Mailing Address 1360 E 9th St
Suite 600

City

Cleveland

State

OH

Zip Code

44114-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023791

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Mr. Paul Catania

Mailing Address 5758 Williamsburg Cir

City

Hudson

State

OH

Zip Code

44236-3780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023792

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

263.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. John B Vann

Mailing Address 107 Gascoigne Bluff Rd

City State Zip Code
 Bluffton SC 29910-6800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carswell Insurance Services

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023793

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. David Orloff

Mailing Address 46441 Shaker Blvd

City State Zip Code
 Beachwood OH 44122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023796

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Ms. Cynthia J Bowman

Mailing Address 1360 E 9th St
 Suite 600

City State Zip Code
 Cleveland OH 44114-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023797

Amount of Each Receipt this Period

440.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

780.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Melissa K Robinson

Mailing Address 4024 West 157th Street

City State Zip Code
 Cleveland OH 44135-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023802

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph DuBois

Mailing Address 10485 Penniman Drive

City State Zip Code
 Chardon OH 44024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023804

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. William C McCarthy

Mailing Address 7347 LaScala Drive

City State Zip Code
 Hudson OH 44236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oswald Companies (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

11 / 07 / 2011

Transaction ID : 34023805

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

208.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Joe Max Green

Mailing Address 8 Austin Hollow Cir

City

Nacogdoches

State

TX

Zip Code

75965-2955

FEC ID number of contributing
federal political committee.

C

Name of Employer

Joe Max Green/Insurance Concepts/Banco

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 15 / 2011

Transaction ID : 34039444

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas M Sandahl

Mailing Address 10623 Camelot Square

City

Saint Francisville

State

LA

Zip Code

70775

FEC ID number of contributing
federal political committee.

C

Name of Employer

BancorpSouth Insurance Services, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34052818

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. Dane O Leavitt

Mailing Address 242 S 200 W

City

Cedar City

State

UT

Zip Code

84720-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Leavitt Group (HQ)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068021

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Rodney B Leavitt

Mailing Address 1970 Terra Vista Way

City

Las Vegas

State

NV

Zip Code

89117-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068022

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Daniel Bowers

Mailing Address 2720 Black Diamond Ter

City

Colorado Springs

State

CO

Zip Code

80918-1570

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIA-Leavitt Insurance Agency, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068023

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Ms. Alma Franzoy-Capron

Mailing Address HC 31 Box 200

City

Hatch

State

NM

Zip Code

87937-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Southwest, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068025

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Curtis Perata

Mailing Address 2748 Seminole Circle

City State Zip Code
 Fairfield CA 94534

FEC ID number of contributing
federal political committee.

C

Name of Employer

James C. Jenkins Insurance Service, Inc

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068036

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. John Connell

Mailing Address P.O. Box 663

City State Zip Code
 Diablo CA 94528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jenkins Insurance Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068037

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. Don G Archibald

Mailing Address 1171 South 5th West

City State Zip Code
 Rexburg ID 83440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Archibald Insurance Center (Leavitt)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068040

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Valine

Mailing Address 3568 Creekwood Dr

City State Zip Code
 Rocklin CA 95677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jenkins Insurance Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068048

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mr. Kirk Rule

Mailing Address 7217 Via Lomas

City State Zip Code
 San Jose CA 95139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Pacific Insurance Brokers

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068056

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. Nathan Esplin

Mailing Address 2131 West 546 South

City State Zip Code
 Cedar City UT 84720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068071

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Mark Kenney

Mailing Address 306 South 800 West

City

Cedar City

State

UT

Zip Code

84720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

11 / 21 / 2011

Transaction ID : 34068092

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Mr. John F Murray Jr.

Mailing Address 10 Naples Court

City

Troy

State

NY

Zip Code

12180-6540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rose & Kiernan, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34093275

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Daniel Bowers

Mailing Address 2720 Black Diamond Ter

City

Colorado Springs

State

CO

Zip Code

80918-1570

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIA-Leavitt Insurance Agency, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34113151

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

540.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Don G Archibald

Mailing Address 1171 South 5th West

City

Rexburg

State

ID

Zip Code

83440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Archibald Insurance Center (Leavitt)

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34113154

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Curtis Perata

Mailing Address 2748 Seminole Circle

City

Fairfield

State

CA

Zip Code

94534

FEC ID number of contributing
federal political committee.

C

Name of Employer

James C. Jenkins Insurance Service, In

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34119052

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Mr. John Connell

Mailing Address P.O. Box 663

City

Diablo

State

CA

Zip Code

94528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jenkins Insurance Group

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34119053

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

85.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Valine

Mailing Address 3568 Creekwood Dr

City State Zip Code
 Rocklin CA 95677

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jenkins Insurance Group

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : 34119060

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mr. Nathan Esplin

Mailing Address 2131 West 546 South

City State Zip Code
 Cedar City UT 84720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leavitt Group (HQ), The

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : 34119065

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Mr. Dane O Leavitt

Mailing Address 242 S 200 W

City State Zip Code
 Cedar City UT 84720-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Leavitt Group (HQ)

Occupation
Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : 34121170

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Rodney B Leavitt

Mailing Address 1970 Terra Vista Way

City

Las Vegas

State

NV

Zip Code

89117-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34121171

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ms. Alma Franzoy-Capron

Mailing Address HC 31 Box 200

City

Hatch

State

NM

Zip Code

87937-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group Southwest, Inc.

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34121172

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. Kirk Rule

Mailing Address 7217 Via Lomas

City

San Jose

State

CA

Zip Code

95139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Pacific Insurance Brokers

Occupation

Insurance Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2011

Transaction ID : 34121185

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Mark Kenney

Mailing Address 306 South 800 West

City

Cedar City

State

UT

Zip Code

84720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leavitt Group (HQ), The

Occupation

Insurance Broker

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : 34121209

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15.00

10495.68

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of John Barrow

Mailing Address PO Box 8166

City	State	Zip Code
Savannah	GA	31412

Purpose of Disbursement

Candidate Name

Rep. John Barrow

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: GA District: 12

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973029

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Prairieland PACMailing Address 228 S. Washington St.
Suite B-20

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973030

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Holt for Congress

Mailing Address P.O. Box 782

City	State	Zip Code
Pennington	NJ	08534

Purpose of Disbursement

Candidate Name

Rush D. Holt

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NJ District: 12

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973031

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Blaine For Congress 2012

Mailing Address PO Box 125

City	State	Zip Code
Holts Summit	MO	65043

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Blaine Luetkemeyer

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MO District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973033

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Moderate Senate 2012

Mailing Address 303 Massachusetts Ave, NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973034

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Peters For Congress

Mailing Address P.O. Box 21535

City	State	Zip Code
Detroit	MI	48221

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Gary C. Peters

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Transaction ID : 33973035

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

The Council of Insurance Agents & Brokers Political Action Committee

011

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

4000.00

The image shows three 16x16 LED displays arranged horizontally, separated by slashes. Each display shows a digit or a group of digits in a 7-segment font. The first display shows '11', the second shows '15', and the third shows '2011'. The digits are formed by lighting up specific segments of the 16x16 grid.

Amount of Each Disbursement this Period

011

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Three 10-pin D-sub connectors are shown, each with a different pin number. The first connector has pin 11, the second has pin 15, and the third has pin 2011. Each connector has a label above it indicating the pin number: 'M M' for 11, 'D D' for 15, and 'Y Y Y Y' for 2011.

Amount of Each Disbursement this Period

011

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. McConnell Senate Committee '14

Mailing Address PO Box 1496

City	State	Zip Code
Louisville	KY	40201

Purpose of Disbursement

011

Candidate Name

Sen. Mitch McConnell

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2011

Transaction ID : 33997811

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00

16000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wired For Change/Salsa Labs Inc.Mailing Address 1700 Connecticut Avenue, NW
Suite 403

City Washington State DC Zip Code 20009

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2011

Transaction ID : 33955833

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. Wired For Change/Salsa Labs Inc.Mailing Address 1700 Connecticut Avenue, NW
Suite 403

City Washington State DC Zip Code 20009

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2011

Transaction ID : 34023735

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address 100 N. Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2011

Transaction ID : 34146076

Amount of Each Disbursement this Period

32.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1232.50

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City	State	Zip Code
Omaha	NE	68103-2878

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2011

Transaction ID : 34146079

Amount of Each Disbursement this Period

6.80

Full Name (Last, First, Middle Initial)

B. Authorize.Net

Mailing Address 808 East Utah Valley Drive

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2011

Transaction ID : 34146080

Amount of Each Disbursement this Period

46.05

Full Name (Last, First, Middle Initial)

C. PayPal, Inc.

Mailing Address 4100 Solutions Center, #774100

City	State	Zip Code
Chicago	IL	60677-4001

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2011

Transaction ID : 34146081

Amount of Each Disbursement this Period

34.48

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

87.33

1319.83
